Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			(Coldinii 17		Coldinia Si					OR T		
TOTAL OLANIO					ton and the second seco			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS			5 minus 20=		·,ø			X\$ 9=	7.	OR	X\$18=	
INDEPENDENT CLAIMS			9 minus 3 = 1					X40=		OR:	X80=	80-
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=	-	OR	+270=	
• If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL		OR	TOTAL	790 -
CLAIMS AS AMENDED - PART II								OTHER THAN				
		(Column 1) CLAIMS		(Colur		(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF MI	Minus	***	CLAIN	=		X40=		OR	X80=	
	FINST PRESE	NTATION OF MIC	BEST AVAILABLE COPY					+135=		OR	_{5.} +270=	
				AVAIL	-ADL	E COP		TOTAL		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE			NUUM. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* .	Minus	PENDENT	CL AIM]=	$\left[\right]$	X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							۱ [+135=		OR	+270=	
	# ***						7	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
AMENDMENTIC		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	\$-	Minus	**		Ē		X\$ 9=		OR	X\$18=	· ·
H	Independent	•	Minus			=	11	X40=		00	X80=	
A		NTATION OF M	ULTIPLE DE	PENDEN	T CLAIN	1	J			OR	 	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=	
** If the entry in column 1 is less than the entry in column 2, write "o" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	mber Previously Pa	id For" (Total	or Independ	dent) is th	ne highest numb	er fo	und in the ap	propriate bo	x in co	olumn 1.	